

IN THE U.S. PATENT AND TRADEMARK OFFICE

In re application of	Allowed April 27, 2009
Stephane RAMARE	Conf. 6791
Application No. 10/510,178	Group 3733
Filed June 30, 2005	Examiner David C. COMSTOCK
SPINAL OSTEOSYNTHESIS SYSTEM	

REQUEST FOR CORRECTED FILING RECEIPT

Assistant Commissioner for Patents	April 29, 2009
P.O. Box 1450	
Alexandria, VA 22313-1450	

Sir:

Receipt is acknowledged of the Filing Receipt for
Serial No. 10/510,178.

It is requested that a new Filing Receipt be issued on
which the word "OSTESYNTHESIS" in the Title of the Invention is
correctly given as OSTEOSYNTHESIS, as shown by the accompanying
originally-filed Application Data Sheet.

Respectfully submitted,

YOUNG & THOMPSON



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(703) 979-4709

Application Data Sheet**Application Information**

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	SPINAL OSTEOSYNTHESIS SYSTEM
Attorney Docket Number::	0581-1007
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	2
Small Entity?::	Yes
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: STEPHANE
Middle Name::
Family Name:: RAMARE
Name Suffix::
City of Residence:: BIARRITZ
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing 10, ALLEE DE L'OREE DU LAC
Address::
City of Mailing Address:: BIARRITZ
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-64200

Correspondence Information

Correspondence Customer 000466
Number::

Representative Information

Representative Customer	000466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR03/01017	4/2/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	02/04181	4/4/02	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::